

FACSIMILE COVER SHEET

RECEIVED
CENTRAL FAX CENTER

MAY 03 2004

OFFICIAL

Licata & Tyrrell P.C.66 E. Main Street
Marlton, New Jersey

Tel: (856) 810-1515

Fax: (856) 810-1454

May 3, 2004

TO: Examiner (TC1600)**GROUP: 1644****FAX NUMBER: 703-872-9306****ATTORNEY DOCKET NO.: 13257-00031(UMD-0038)****SERIAL NO.: 09/779,689****FILED: February 8, 2001****NUMBER OF PAGES: 9****MESSAGE:** Attached please find Executed Power of Attorney with Revocation; Executed Certificate Under 37 CFR 3.73 (b); Copy of Recorded Assignment and Certificate of Transmission by Facsimile.**Jane Massey Licata, Registration No. 32,257****URGENT! PLEASE DELIVER IMMEDIATELY UPON RECEIPT. THANK YOU!**

* * * * *

If you have any questions, or did not receive the proper number of pages, or had trouble during transmission, please call 856-810-1515.

CONFIDENTIALITY NOTICE

The information contained in this facsimile message is legally privileged and confidential, and intended only for the use of the individual(s) and/or entity(ies) named above. If you are not the intended recipient, you are hereby notified that any unauthorized disclosure, copying, distribution or taking of any action in reliance on the contents of the telecopied materials is strictly prohibited and review by any individual other than the intended recipient shall not constitute waiver of the attorney client privilege. If you have received this transmission in error, please immediately notify us by telephone in order to arrange for the return of the materials. Thank you.

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No.	
Applicant(s): Kiran M. Das			13257-00031(UMD-0038)	
Serial No. 09/779,689	Filing Date February 8, 2001	Examiner Nolan, Patrick J.	Group Art Unit 1644	
Invention: Therapeutic and Diagnostic Methods for Ulcerative Colitis and Associated Disorder				
<p>I hereby certify that this <u>Power of Attorney with Revocation and Certificate under 37 CFR 3.73(b)</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax, No. <u>703-872-9307</u>) on <u>May 3</u>, 2004 (Date)</p> <p><u>Jane Massey Licata</u> (Typed or Printed Name of Person Signing Certificate)</p> <p><u>Jane Massey Licata</u> (Signature)</p> <p>Note: Each paper must have its own certificate of mailing.</p>				

P18/REV01

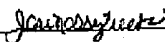
TRANSMITTAL LETTER
(General - Patent Pending)Docket No.
13257-00031(UMD-0038)In Re Application Of: **Kiran M. Das**Serial No.
09/779,689Filing Date
February 8, 2001Examiner
Nolan, Patrick J.Group Art Unit
1644Title: **Therapeutic and Diagnostic Methods for Ulcerative Colitis and Associated Disorder**TO THE COMMISSIONER FOR PATENTS:

Transmitted herewith is:

**Power of Attorney with Revocation
Certificate under 37 CFR 3.73(b)**

in the above identified application.

- ☒ No additional fee is required.
- ☐ A check in the amount of _____ is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. _____ 50-1619 as described below.
- ☐ Charge the amount of _____
- ☒ Credit any overpayment.
- ☒ Charge any additional fee required.



Signature

Dated: May 3, 2004

Jane Massey Licata, Reg. No. 32,257

Licata & Tyrrell P.C.
66 E. Main Street
Marlton, NJ 08053
Tel: 856-810-1515
Fax: 856-810-1454

I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Signature of Person Mailing Correspondence

Jane Massey Licata

Typed or Printed Name of Person Mailing Correspondence

CC:

P16A/REV01

APR-29-2004 THU 03:37 PM Patents & Licensing
04/29/04 15:18 FAX 856 810 1454

FAX NO. 7322359358

LICATA & TYRRELL

002/007

PTO/SB/82 (05-03)

Approved for use through 11/30/2005. OMB 0851-0035
Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control

**REVOCATION OF POWER OF
ATTORNEY and
APPOINTMENT OF NEW
POWER OF ATTORNEY**

Application Number	09/779,689
Filing Date	February 8, 2001
First Named Inventor	Das
Art Unit	1644
Examiner Name	Nelms, Patrick J.
Attorney Docket Number	UMD-0038

I hereby revoke all previous powers of attorney given in the above-identified application:

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners at Customer Number: ☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
Customer Number.

26259

OR

☒ Firm or
Individual Name Licata & Tyrrell P.C.

Address 66 East Main Street

Address

City Marlton

Country US

State NJ

ZIP

08053

Telephone (856) 810-1515

Fax (856) 810-1454

I am the:

☐ Applicant/Inventor☒ Assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37CFR 3.73(b) is enclosed (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name

DENISE MULKERN
VICE PRESIDENT FOR FINANCE AND TREASURER

Signature

Denise Mulkern

Date

4-26-04

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to the (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-5139 and select option 2

APR-29-2004 THU 03:37 PM Patents & Licensing
U.S. PATENT & TRADEMARK OFFICE

FAX NO. 7322359358

LICATA & TYRRELL

Approved for use through 07/31/2005. OMB 0851-0031
 Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE
 Patent and Trademark Office U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Kiran M. DasApplication No./Patent No.: 09/779,689Filed/Issue Date: February 20, 2001Entitled: Therapeutic and Diagnostic Methods for Ulcerative Colitis and Associated Disorders
University of Medicine and Dentistry of NJ, a a body corporate and politic of the State of NJ
 (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
 The extent (by percentage) of its ownership interest is _____ %
 in the patent application/patent identified above by virtue of either:

A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 012041, Frame 0071, or for which a copy thereof is attached.

OR

B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
 The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
 The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
3. From: _____ To: _____
 The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

☒ Copies of assignments or other documents in the chain of title are attached.

(NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08)

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

4/26/04
 Date

DENISE MULKERN
 VICE PRESIDENT FOR FINANCE AND TREASURY
 Typed or printed name

Denise Mulkern
 Signature

Telephone number

Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETE D FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 and select option 2.